MFT-3 R (2-00, R-3)

Application Required by NJ Motor Fuel Tax Law

Make any necessary changes below for 1 - 5

1. FID #

Name

STATE OF NEW JERSEY Division of Taxation MOTOR FUEL TAX PO Box 189 Trenton, NJ 08695-0189

USE FOR RENEWAL ONLY

APPLICATION FOR RENEWAL OF EXPORTER'S LICENSE

Application is hereby made by the undersigned for renewal of a Gasoline Exporter's License to operate in the State of New Jersey in compliance with Chapter 39 of Title 54, Taxation, of the Revised Statutes and the Acts amendatory thereof and supplemental thereto. Every Exporter's License is subject to payment of a renewal fee of \$450.00 for a three year period. Please return this application and a check or money order made payable to: State of New Jersey-MFT, on or before April 1.

OR

Soc. Sec. # of owner

(If INCORPO	(If INCORPORATED - give Corp. Name; IF NOT - give Last Name, First Name, MI of owner(s))						
3. Trade Name	5. Mail	ing Name and Address - (if differ	ent from farm address)				
4. Business Location:	Nam	Name					
Street	Stree	et					
City							
Zip Code -	Zip (Code	-				
(Give 9-digit Zip)		(Give 9-c	ligit Zip)				
Please fill in all information below: 6. Type of ownership (check one):							
☐ NJ Corporation ☐ Sole Proprie	•	☐ Out-of-State Corporation	☐ Limited Partnership				
☐ Other - explain							
7. Telephone Numbers: Contact Person		Title					
Daytime: ()	ExtEvening	g: ()	Ext				
8. Provide the following information for ALL ow	ners, partners or responsible corporate	te officers. (If more space is ne	eded, attach rider).				
NAME	SOCIAL SECURITY NUMBER						
(Last Name, First, M.I.)	TITLE	(Street, City, 7	Zip) OWNED				
NOTE: On a separate sheet of paper provide the na 9. List parent company, wholly owned subsidiaries	_	_	-				

Iten	n number 10 must be completed by out-of-state business	es.					
10.	Give name, title and address of agent in New Jersey or registered New Jersey agent on whom service may be made (must be documented by letter from agent)						
11.	Is applicant a licensed distributor, importer or exporter in another state or foreign country? Please indicate state, license number, and point of contact in each state (include name and telephone number). Additionally, please attach a copy of each license. If applicant is a foreign importer, include copy of US Customs permit.						
12.	Does applicant hold a Federal Form 637? Is so, identify the issuing IRS District Office, provide copy of 637 certificate and copies of applicant's last two quarterly Form720 reports filed with the IRS.						
13.	Does applicant hold any other New Jersey Motor Fuel License? If yes, explain						
14.	Has applicant ever had a Motor Fuel License denied, suspended, cancelled or revoked in New Jersey or any other jurisdiction? If yes, explain						
15.	Does applicant have any outstanding liability or litigation? If yes, explain						
16.	Indicate below the maximum number of gallons of motor fuels that you expect to import into this state and the maximum number of gallons of motor fuel you expect to purchase within this state in any month. IMPORTS Gal. NJ PURCHASES Gal. TOTAL HANDLE Gal.						
	NOTE : An "exchange" or "book transfer" of gasoline in Reference: N.J.S.A. 54:39-7.	this State is a purch	ase and/or sale and must be i	reported by seller and purchaser.			
17 .	Types of motor fuel to be handled and percentage of each.		%	%			
18.	Describe in detail applicant's planned activity and need for this license.						
19.	Indicate below by which type of carrier you expect to receive/import motor fuels into this State. □ Tanker □ Pipeline (provide copy of agreement) □ Barge □ Tank Car □ Tank Truck						
20.	List below each manufacturing, "M" for manufacturing, "V	V" for wholesale, "R	" for retail and "L" for lease	d. (If more space is needed, attach rider)			
	Location	Class M, W, R, L	Number of Tank	Total Capacity Gallons			
	Qualification fro an Exporter License may be predicated upon applicant meeting the test of an Exporter. An Exporter License is required by any person who acquires title or takes delivery of gasoline within New Jersey and subsequently exports such gasoline from the State. a. Will applicant's exports qualify as defined above?						
	Is applicant registered for Petroleum Products Gross Recei The undersigned applicant states, (under penalty of perjury						
20.	particular.), that all the inform	ation contained in this applic	auton is true and accurate in every			
	Name of Applicant		Signature of Owne	er, Partner or Officer			
			Title	Date			
		-	application can be processed				
			in the processing of your rec	•			
	The Division of Taxation reserves the right Return completed application and \$450 fe			_			
	FO	R DIVISION US	E ONLY				
Lice			nvestigation Initiated				
Effective Date I			nvestigation Completed				
App	proved						
	commendations:						